



State of Missouri

Matt Blunt, Secretary of State

Commissions

PO Box 784, Jefferson City, MO 65102

Toll-Free (866) 223-6535 or (573) 751-2783

Application for Amended Commission as a Notary Public

Change of Name

(Application fee \$5)

Print or Type

1. Name _____ Date of Birth (MM/DD/YYYY) _____
(This name must appear as it is signed in #8)

2. Home Address _____

City _____ State _____ Zip Code _____

3. County of Residence (St. Louis City Residents please specify City) _____

4. Daytime Phone Number _____

5. Commission Dates Beginning _____ Ending _____

6. Commission Number _____ (for those receiving commissions after August 28, 2004)

7. **CHANGE IN NAME**

I hereby request the Secretary of State to issue an amended notary public commission from the name style

_____ originally issued to _____ effective on
(Name as it appears on Commission) (Type new name here)
the _____ day of _____.

8. Signature of Applicant (This signature must appear as it is typed or written in #1)

PAYMENT

☐ \$5 Check or Money Order Enclosed (Payable to Director of Revenue)

Credit Card: ☐ Master Card ☐ Visa ☐ Discover ☐ American Express

NAME AS IT APPEARS ON CREDIT CARD _____

EXPIRATION DATE _____ CARD NUMBER (16 Digits) _____

SIGNATURE _____

Amended Application Instructions

Name Change

1. **Name** - You should print or type your name as you want it to appear on your commission certificate. You are required by law to use your full last name, while initials may be used for first and middle names.

Date of Birth - Please provide your birth date in numerals: month/day/year. This is to confirm that applicants are at least eighteen years of age.

2. **Residence Address** - Please provide the address at which you reside. If your mail goes to a post office box, please include a street address after the PO Box number. Also give the city, state and zip code.
3. **County of Residence** - Please indicate the county in which you legally reside and are registered to vote, even if you work in a different county. You are commissioned for the county in which you live, but you are able to notarize anywhere in the state of Missouri. *If you reside in St. Louis City, please put St. Louis City in the county blank.
4. **Daytime Phone** - You are requested to provide a phone number where we can reach you BETWEEN THE HOURS OF 8:00 a.m. and 5:00 p.m., should we need to verify information given on the application in order to prevent the delay of returning the form to you for verification.
5. **Commission Dates** – Please indicate the beginning and ending dates of your present commission as a notary public.
6. **Commission Number** - Please provide your commission number if you were commissioned after August 28, 2004.
7. **Change in Name**

Indicate both the previous name and the new name style under which you wish to be commissioned as a notary public.

8. **Signature** - Complete the form by adding your signature in the same name style you indicated in # 1 on the application. The Secretary of State's Office can only accept original signatures - photocopied signatures will be rejected.

Please include your \$5 application fee.

Please include your previous notary certificate. You will receive a new certificate with your new information.